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	FOR EXTENSION OF	· · · · · · · · · · · · · · · · · · ·		37799.00200			
		In re Application of:	Hoberman				
		Application Number 11/718,885 Filed: 11/21/2003					
	For System and Method for Data File Processing						
		Group Art Unit Examiner 2193 Chavis					
	request under the provision in the above identified ap	•	a) to extend the pe	riod for filing a			*
	iested extension and appr me period desired):	opriate non-small-ent	ity fee are as follow	<b>/</b> 8			
	One month (37 CFF	R 1.17(a)(1))		\$			
	☐ Two months (37 CF	R 1.17(a)(2))		\$			
	Three months (37 C	FR 1.17(a)(3))		\$10	050.00		
	Four months (37 C	FR 1.17(a)(4))					
	☐ Five months (37 CF	• • • •		s			
□ A	pplicant claims small entit	v status. See 37 CFf	R 1.27. Therefore,	the fee amount s	hown above		
ls	s reduced by one-half, and	the resulting fee is:					
_	check in the amount of the						
	Payment by credit card. Form PTO-2038 is attached.						
	he Commissioner has alr		to charge fees in t	his			
_	ipplication to a Deposit Ad						
	he Commissioner is here	•	• • • • • • • • • • • • • • • • • • • •	may be required,			
	or credit any overpayment		Number <u>13-3250</u> .				
_	have enclosed a duplicat	e copy of this sheet.					
_	applicant/inventor.						•
{	☐ assignee of record of the	ne entire interest. Se	e 37 CFR 3.71				
	Statement under 37 (	OFR 3.73(b) is enclos	ed. (Form PTO/SE	3/96).			
	attorney or agent of rea	ord.			0000009	133250	1171888
[	attorney or agent unde	r 37 CFR 1.34(a).	10.	/19/2007 VBUI11		*****	
	Registration number if as	cting under 37 CFR 1,34(a).	01	FC:1253	1050.00 DA		
WARNII be inclu	NG: Information on this Ided on this form. Provi	form may become p de credit card infor	ublic. Credit card	i information sh rization on PTO-	ould not 2038.		
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	October 17, 2007						
	Date	•	<del>-</del>	Signature			
Chris L. Holm, Reg. #39,227 Typed or printed name			Chris	L. Holm, Reg. #	39,227		
E GENERAL	ee of ell the inventors or essigner en one signature is required, see	is of record of the entire into below <sup>a</sup> .	ercet or their representa	Eve(s) are required. S	elqitium timout		

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark. Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents. Washington, DC 20231.

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PAGE 23/24 \* RCVD AT 10/17/2007 5:42:04 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/20 \* DNIS:2738300 \* CSID:Milbank Tweed LA \* DURATION (mm-ss):06-38